

Please type a plus sign (+) inside this box → ☐

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

Use for all correspondence after initial filing)

Application Number	10/083,009 084-009
Filing Date	February 26, 2002
First Named Inventor	Joseph P. Jones et al.
Group Art Unit	3742
Examiner Name	Unknown
Attorney Docket Number	9858-000018

Total Number of Pages in This Submission

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Supplemental Information Disclosure Statement, Supplemental Form HDP-1449 Citation and 2 cited references <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard			
<table><tr><td>Remarks</td><td rowspan="2">RECEIVED NOV 28 2003 TECHNOLOGY CENTER R3700</td></tr><tr><td>Express Mail Label No.: EV 298496851 US</td></tr></table>			Remarks	RECEIVED NOV 28 2003 TECHNOLOGY CENTER R3700	Express Mail Label No.: EV 298496851 US
Remarks	RECEIVED NOV 28 2003 TECHNOLOGY CENTER R3700				
Express Mail Label No.: EV 298496851 US					

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Kelly K. Burris, Reg. No. 46,361 Harness, Dickey & Pierce, P.L.C.
Signature	<i>Kelly K. Burris</i>
Date	November 20, 2003

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this			
date: November 20, 2003			
Typed or printed name		Kelly K. Burris	
Signature	<i>Kelly K. Burris</i>	Date	November 20, 2003

EV 298496851 US